

Aug 26 05 12:45p

CARRITHERS LAW OFFICE

502 456 2242

P.2

Rec'd PCT/PTO 31 AUG 2005
10/5/7961

PTO/SB/01 (04-05)

Approved for use through 07/31/2008, OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration
Submitted
With Initial
Filing

OR

☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	AD136/2001
First Named Inventor	Stephen E. Parent
COMPLETE IF KNOWN	
Application Number	10/517,961
Filing Date	June 16, 2003
Art Unit	
Examiner Name	Bryant, David

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Stephen E. Parent, 10208 Springhurst Gardens Circle, Louisville, KY 40241
Daniel L. Day, 10420 Glenmary Farm Drive, Louisville, KY 40291

(Title of the Invention)

the specification of which SPIKED PLATE FOR LOG END AN HAND TOOL FOR REMOVING THE SAME

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) (12/14/04) as United States Application Number or PCT International

Application Number PCT/US03/18806 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
60/388,778	US	(06/14/02)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is in the (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	<input type="checkbox"/> The address associated with Customer Number:		OR	<input checked="" type="checkbox"/> Correspondence address below
Name <u>David W. Carrithers</u> <u>CARRITHERS LAW OFFICE, PLLC</u>				
Address <u>6060 Dutchman's Lane, Suite 140</u>				
City <u>Louisville</u>	State <u>KY</u>	ZIP <u>40205</u>		
Country <u>US</u>	Telephone <u>502.452.1233</u>	Email		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)) <u>Stephen E.</u>		Family Name or Surname <u>Parent</u>		
Inventor's Signature <u>[Signature]</u>		Date <u>8-26-05</u>		
Residence: City <u>Louisville</u>	State <u>KY</u>	Country <u>US</u>	Citizenship <u>US</u>	
Mailing Address <u>10208 Springhurst Gardens Circle</u>				
City <u>Louisville</u>	State <u>KY</u>	Zip <u>40241</u>	Country <u>US</u>	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)) <u>Daniel L.</u>		Family Name or Surname <u>Day</u>		
Inventor's Signature <u>[Signature]</u>		Date <u>8-26-05</u>		
Residence: City <u>Louisville</u>	State <u>KY</u>	Country <u>US</u>	Citizenship <u>US</u>	
Mailing Address <u>10420 Glenmary Farm Drive</u>				
City <u>Louisville</u>	State <u>KY</u>	Zip <u>40291</u>	Country <u>US</u>	
<input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.				

Rec'd ~~PTO~~ 31 AUG 2005 #4

PTO/SB/81 (04-05)

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/517,961
Filing Date	June 16, 2003
First Named Inventor	Stephen E. Parent
Title	Spiked Plate for Log End
Art Unit	
Examiner Name	Bryant, David
Attorney Docket Number	ADI36/2001

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
David W. Carrithers	35475

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

☒ Firm or Individual Name David W. Carrithers
CARRITHERS LAW OFFICE, PLLC

Address One Paragon Centre
6060 Dutchman's Lane, Suite 140

City Louisville State KY Zip 40205

Country US

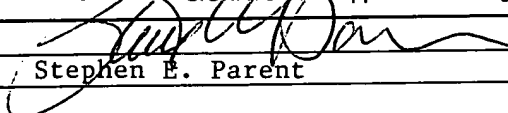
Telephone 502.452.1233 Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	8/29/05
Name	Stephen E. Parent	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

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PTO/SB/81 (04-05)

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/517,961
Filing Date	June 16, 2003
First Named Inventor	Stephen E. Parent
Title	Spiked Plate for Log End
Art Unit	
Examiner Name	Bryant, David
Attorney Docket Number	AD136/2001

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OR

☒ Practitioner(s) named below:

Name	Registration Number
David W. Carrithers	35475

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Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number.

OR

☐ The address associated with Customer Number:

OR

☒ Firm or Individual Name **David W. Carrithers
CARRITHERS LAW OFFICE, PLLC**

Address **One Paragon Centre
6060 Dutchman's Lane, Suite 140**

City **Louisville** State **KY** Zip **40205**

Country **US**

Telephone **502.452.1233**

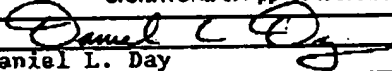
Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	8-26-05
Name	Daniel L. Day	Telephone	502-239-3860
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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